Case 22-10616-M Document 1 Filed in USBC ND/OK on 06/30/22 Page 1 of 68

United States Bankruptcy Court Northern District of Oklahoma, Tulsa Division

IN RE:	Case No
Reynolds, Joshua Kent	Chapter 7
Debtor(s)	-
<u>VERIFICATION AS TO OF</u>	FICIAL MAILING MATRIX
✓ Original ☐ Amendment ☐ Add ☐	Delete
I hereby certify under penalty of perjury that the master ma Submission application, or uploaded to the Electronic Case F best of my knowledge.	-
I further acknowledge that (1) the accuracy and completener responsibility of the debtor and the debtor's attorney, (2) the that the various schedules and statements required by the Bar	court will rely on the creditor listing for all mailings, and (3)
If this filing is an amendment to the creditor list, indicated deleted at this time. (For verification purposes, attach a lideleted.)	
# of Creditors (or if amended, # of creditors a	added)
Method of submission:	
 (a) ✓ uploaded to Electronic Case Filing (b) Creditor List Submission application at www.oknb.uscourts.gov, or available 	on (to be used by Pro Se filers, Found on the Court's website
# of Creditors (on attached list) to be deleted	
/s/ Joshua Kent Reynolds	
Debtor	Joint Debtor
/s/ William Bryan Irons	Date: June 30, 2022
Attorney William Bryan Irons 20138 Irons Law Firm, PLLC 3315 East 39th St. Tulsa, OK 74135-4631	[Check if applicable]
(918) 392-0079 Fax: (918) 794-0069 birons@ironslegal.com	Creditor(s) with foreign addresses included

American Express PO Box 650448 Dallas, TX 75265-0448

Ascension St John Owasso PO Box 42008 Phoenix, AZ 85080-2008

Bank of Oklahoma PO Box 2300 Tulsa, OK 74102-2300

Bank of Oklahoma Visa PO Box 790408 Saint Louis, MO 63179-0408

Best Buy PO Box 790441 Saint Louis, MO 63179-0441

Broken Arrow Fire Department C/O Utility Department 220 S 1st St Broken Arrow, OK 74012-4152

Capital One Bank PO Box 85015 Richmond, VA 23285-5015 Citadel Properties PO Box 470014 Tulsa, OK 74147-0014

Citibank PO Box 6004 Sioux Falls, SD 57117-6004

Credit One Visa PO Box 60500 City of Industry, CA 91716-0500

E A Stone 6523 E Independence St Tulsa, OK 74115-7861

Express Wellness Urgent Care 503 S Aspen Ave Broken Arrow, OK 74012-2296

Freedom Road Financial 10509 Professional Cir Ste 100 Reno, NV 89521-4883

Home Depot PO Box 6497 Sioux Falls, SD 57117-6497 Lowes/Synchrony Bank PO Box 965003 Orlando, FL 32896-5003

Western Sun Credit Union 4620 W Kenosha St Broken Arrow, OK 74012-8966

Windstream 1 W 3rd St Tulsa, OK 74103-3532

Case 22-10616-M Document 1 Filed in USBC ND/OK on 06/30/22 Page 5 of 68

United States Bankruptcy Court Northern District of Oklahoma, Tulsa Division

IN RE:	Case No	Case No.				
Reynolds, Joshua Kent		Chapter 7				
Debtor(s)						
BUSINESS INCOME AND	EXPENSES					
FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (Note: ONL	Y INCLUDE information directly re	elated to the business				
operation.)	1 INCLUDE Information directly ic	rated to the business				
PART A - GROSS BUSINESS INCOME FOR THE PREVIOUS 12 MONT	ΓHS:					
1. Gross Income For 12 Months Prior to Filing:	\$					
PART B - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCO	DME:					
2. Gross Monthly Income:		\$65,735.00				
PART C - ESTIMATED FUTURE MONTHLY EXPENSES:						
3. Net Employee Payroll (Other Than Debtor)	\$					
4. Payroll Taxes	\$ 					
5. Unemployment Taxes	\$					
6. Worker's Compensation	\$					
7. Other Taxes	\$					
8. Inventory Purchases (Including raw materials)	\$					
9. Purchase of Feed/Fertilizer/Seed/Spray	\$					
10. Rent (Other than debtor's principal residence)	\$					
11. Utilities	\$					
12. Office Expenses and Supplies	\$ 600.00					
13. Repairs and Maintenance	\$ 283.00					
14. Vehicle Expenses	\$					
15. Travel and Entertainment	\$					
16. Equipment Rental and Leases	\$					
17. Legal/Accounting/Other Professional Fees	\$					
18. Insurance	\$348.00					
19. Employee Benefits (e.g., pension, medical, etc.)	\$					
20. Payments to be Made Directly by Debtor to Secured Creditors for Pre-	-Petition					
Business Debts (Specify):	\$					
21. Other (Specify):	\$ 55,673.00					
See Continuation Sheet						
22. Total Monthly Expenses (Add items 3-21)		\$ 58,904.00				
PART D - ESTIMATED AVERAGE <u>NET</u> MONTHLY INCOME						
23 AVERAGE NET MONTHLY INCOME (Subtract Item 22 from Ite	em 2)	\$ 6.831.00				

Case 22-10616-M Document 1 Filed in USBC ND/OK on 06/30/22 Page 6 of 68

IN RE Reynolds, Joshua Kent		Case No.	
	Debtor(s)		
	BUSINESS INCOME AND EXPENSES	}	
	Continuation Sheet - Page 1 of 1		
Other:			
1099 Employee Wages	31,893.00		
Storage Rental	375.00		
Materials	12,805.00		
Advertising	600.00		
Contract Labor	10 000 00		

Case 22-10616-M Document 1 Filed in USBC ND/OK on 06/30/22 Page 7 of 68

United States Bankruptcy Court Northern District of Oklahoma, Tulsa Division

IN RE:		Case No
Reynolds, Joshua Kent		Chapter 7
•	Debtor(s)	

	TICE TO CONSUMER DEBTOR() F THE BANKRUPTCY CODE	S)		
Certificate of [Non-Attorney] Bankruptcy Petition Preparer				
I, the [non-attorney] bankruptcy petition preparer signing the notice, as required by § 342(b) of the Bankruptcy Code.	debtor's petition, hereby certify that I deli	vered to the debtor the attached		
Printed Name and title, if any, of Bankruptcy Petition Prepar Address:	petition pre the Social S principal, re the bankrup	rity number (If the bankruptcy parer is not an individual, state eccurity number of the officer, esponsible person, or partner of ttcy petition preparer.)		
X		y 11 U.S.C. § 110.)		
partner whose Social Security number is provided above.	,			
Certifi	cate of the Debtor			
I (We), the debtor(s), affirm that I (we) have received and real	ad the attached notice, as required by § 342	2(b) of the Bankruptcy Code.		
Reynolds, Joshua Kent	X /s/ Joshua Kent Reynolds	6/30/2022		
Printed Name(s) of Debtor(s)	Signature of Debtor	Date		
Case No. (if known)	X			
	Signature of Joint Debtor (if any	y) Date		

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Software Copyright (c) 2022 CINGroup - www.cincompass.com

Fill in th	is information to ident	fy your case:		
Debtor 1				
Debior	Joshua Kent Rey First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
	nkruptcy Court for the:	NORTHERN DIST	RICT OF OKLAHOMA, TULSA DIVISION	
Officed States Ba	Tikruptcy Court for the.	NORTHERN DIST	THE TOT OREALIONIA, TOESA DIVISION	
Case number(if known)				☐ Check if this is an amended filing
	nt of Intention		viduals Filing Under Chapte	er 7 12/15
	vidual filing under cha e claims secured by yo		out this form if:	
■ you have leas You must file this	ed personal property a s form with the court w ver is earlier, unless th	nd the lease has no ithin 30 days after y	t expired. ou file your bankruptcy petition or by the date set f time for cause. You must also send copies to the c	
•	ople are filing together te the form.	in a joint case, both	n are equally responsible for supplying correct info	rmation. Both debtors must sign
	and accurate as possib our name and case nur		needed, attach a separate sheet to this form. On the	top of any additional pages,
Part 1: List Yo	our Creditors Who Hav	e Secured Claims		
1 For any credito	ore that you listed in Pa	art 1 of Schedule D:	Creditors Who Have Claims Secured by Property (Official Form 106D) fill in the
information be	low.		, , ,	
identify the cre	editor and the property t	nat is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's F name:	reedom Road Finan	cial	☐ Surrender the property. ☐ Retain the property and redeem it.	■ No
Description of	2020 KTM Super I)uke 1290	■ Retain the property and enter into a <i>Reaffirmation</i>	☐ Yes
property securing debt:	2020 Krim Gupor I	74KC 1200	Agreement. ☐ Retain the property and [explain]:	_
Creditor's W	Vestern Sun Credit I	Jnion	☐ Surrender the property.	□ No
name:			☐ Retain the property and redeem it.	-
Description of	2019 Ford F350		Retain the property and enter into a Reaffirmation Agreement.	Yes
property			Retain the property and [explain]:	
securing debt:				_
Part 2: List Yo	our Unexpired Persona	I Property Leases		
For any unexpire the information b	ed personal property le below. Do not list real e	ase that you listed in state leases. Unexpi	n Schedule G: Executory Contracts and Unexpired ired leases are leases that are still in effect; the leas ustee does not assume it. 11 U.S.C. § 365(p)(2).	
Describe your u	nexpired personal prop	perty leases		Will the lease be assumed?
Lessor's name:	· · · · · · · · · · · · · · · · · · ·			
Official Form 108		Statement of In-	tention for Individuals Filing Under Chapter 7	page '

Statement of Intention for Individuals Filing Under Chapter 7

page 1

Case 22-10616-M Document 1 Filed in USBC ND/OK on 06/30/22 Page 9 of 68

Debtor 1 Reynolds, Joshua Kent	Case number (if known)
Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Lessor's name: Description of leased	□ No
Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention a property that is subject to an unexpired lease.	bout any property of my estate that secures a debt and any personal
X /s/ Joshua Kent Reynolds	X
Joshua Kent Reynolds Signature of Debtor 1	Signature of Debtor 2
Date June 30, 2022	Date

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OKLAHOMA, TULSA DIVISION	<u> </u>	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

02/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

t 1: Identify Yourself				
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
Your full name				
Write the name that is on	Joshua			
your government-issued	First name	First name		
example, your driver's	Kent			
license or passport).	Middle name	Middle name		
Bring your picture	Reynolds			
with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)		
All other names you have used in the last 8 years				
Include your married or maiden names.				
Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2388			
	Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. About Debtor 1: Joshua First name Kent Middle name Reynolds Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number xxx-xx-2388		

Case 22-10616-M Document 1 Filed in USBC ND/OK on 06/30/22 Page 11 of 68

Debtor 1 Reynolds, Joshua Kent Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EIN	EIN		
5.	Where you live		If Debtor 2 lives at a different address:		
		2110 W Pittsburg Pl Broken Arrow, OK 74012-5189			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Tulsa County	County		
			, in the second		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

Deb	tor 1	Reynolds, Joshua	Kent				Case number (if known)	
Par	t 2:	Tell the Court About Y	our Bank	ruptcy Ca	se			
7.	Bank	chapter of the cruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	cnoc	sing to file under	■ Chap	ter 7				
			☐ Chap	ter 11				
			☐ Chap	ter 12				
			☐ Chap	ter 13				
								1.4.7
8.	How	you will pay the fee	abo	out how you	u may pay. Typically, i ey is submitting your p	f you are paying the fee your	with the clerk's office in your local court for more self, you may pay with cash, cashier's check, or matterney may pay with a credit card or check with a	oney order.
					the fee in installme Installments (Official F		n, sign and attach the Application for Individuals to	Pay The
			no	t required to	o, waive your fee, and	may do so only if your incom	only if you are filing for Chapter 7. By law, a judge the is less than 150% of the official poverty line that s). If you choose this option, you must fill out the A	applies to
						/aived (Official Form 103B)		,-,
9.		you filed for ruptcy within the last	■ No.					
	8 yea		☐ Yes.					
				District		When	Case number	
				District		When	Case number	
				District		When	Case number	
10.		any bankruptcy cases	■ No					
	a spo this a bus	ling or being filed by buse who is not filing case with you, or by siness partner, or by filiate?	☐ Yes.					
				Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor			Relationship to you	
				District		When	Case number, if known	
11.	Do y	ou rent your	□ No.	Go to I	ine 12.			
	resid	lence?	Yes.	Has yo	our landlord obtained	an eviction judgment agains	st you?	
					No. Go to line 12.			
					Yes. Fill out <i>Initial St</i> bankruptcy petition.	atement About an Eviction J	udgment Against You (Form 101A) and file it with	this

Case 22-10616-M Document 1 Filed in USBC ND/OK on 06/30/22 Page 13 of 68

Deb	otor 1 Reynolds, Joshua	Kent			Case number (if known)	
Par	Report About Any Bus	sinesses \	You Own	as a Sole Proprieto	r	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.		
		☐ Yes.	Name	and location of busi	ness	
	A sole proprietorship is a					
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any		
	If you have more than one sole proprietorship, use a separate sheet and attach it		Numb	per, Street, City, State	e & ZIP Code	
	to this petition.		Chec		to describe your business:	
					ess (as defined in 11 U.S.C. § 101(27A))	
				G	Estate (as defined in 11 U.S.C. § 101(51B))	
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))	
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))	
				None of the above		
Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach you		ourt must know whether you are a small business debtor so that it can set appropriate small business debtor, you must attach your most recent balance sheet, statement of deral income tax return or if any of these documents do not exist, follow the procedure in 11				
	For a definition of small	■ No.	I am ı	not filing under Chapt	ter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.		
		☐ Yes.		I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I on not choose to proceed under Subchapter V of Chapter 11.		
		☐ Yes.			1, I am a small business debtor according to the definition in the Bankruptcy Code, and I ubchapter V of Chapter 11.	
Par	t 4: Report if You Own or	Have Any	Hazardo	us Property or Any	Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or		What is	the hazard?		
	safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number Street City State 9 7in Code	
					Number, Street, City, State & Zip Code	

Debtor 1 Reynolds, Joshua Kent

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

Lam not required to receive a briefing about

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or makinç rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 22-10616-M Document 1 Filed in USBC ND/OK on 06/30/22 Page 15 of 68

Dep	tor 1 Reynolds, Joshua	Kent		Case	number (if known)	
Part	6: Answer These Question	ons for Re	porting Purposes			
16.	What kind of debts do you have?	16a.	Are your debts primarily consum individual primarily for a personal, fa		e defined in 11 U.S.C.§ 101(8)) as "incurred by an
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.	Are your debts primarily busines for a business or investment or thro			n money
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts you owe that	are not consumer debts or bus	iness debts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. Go	to line 18.		
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do you paid that funds will be available to di			istrative expenses are
	administrative expenses are paid that funds will be		■ No			
	available for distribution to unsecured creditors?		☐ Yes			
18.	How many Creditors do	■ 1-49		1 ,000-5,000	25,001-50,000)
	you estimate that you owe?	□ 50-99		☐ 5001-10,000	50,001-100,00	
		☐ 100-19 ☐ 200-99		10,001-25,000	☐ More than100	,000
19.	How much do you	□ \$0 - \$5	50.000	□ \$1,000,001 - \$10 million	☐ \$500,000,001	- \$1 billion
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,00	01 - \$10 billion
		□ \$100,001 - \$500,000 □ \$500,001 - \$1 million		□ \$50,000,001 - \$100 millior □ \$100,000,001 - \$500 millior		·
		\$500,0	001 - \$1 million	— \$100,000,001 - \$500 millio	——————————————————————————————————————) DIIIION
20.	How much do you	□ \$0 - \$5	50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001	- \$1 billion
	estimate your liabilities to be?		01 - \$100,000	□ \$10,000,001 - \$50 million		•
			001 - \$500,000	□ \$50,000,001 - \$100 millior □ \$100,000,001 - \$500 millior	+ -,,	
		山 \$500,0	001 - \$1 million	— \$100,000,001 \$000 Hilling		
Part	7: Sign Below					
For	you	I have exa	amined this petition, and I declare und	der penalty of perjury that the int	formation provided is true and o	correct.
			chosen to file under Chapter 7, I am ide. I understand the relief available u			
			ney represents me and I did not pay ined and read the notice required by		not an attorney to help me fill o	out this document, I
		I request	relief in accordance with the chapte	r of title 11, United States Code	e, specified in this petition.	
		case can	and making a false statement, concearesult in fines up to \$250,000, or impua Kent Reynolds			
		Joshua	Kent Reynolds of Debtor 1	Signature of	Debtor 2	
		Executed	on June 30, 2022 MM / DD / YYYY	Executed on	MM / DD / YYYY	

Debtor 1 Reynolds, Joshu	a Kent	Cas	se number (if known)
For your attorney, if you are represented by one	I, the attorney for the debtor(s) named in this petition, decla Chapter 7, 11, 12, or 13 of title 11, United States Code, and person is eligible. I also certify that I have delivered to the company of the company of the state of th	I have explained lebtor(s) the notic	the relief available under each chapter for which the ce required by 11 U.S.C. § 342(b) and, in a case in
If you are not represented by an attorney, you do not need to file this page.	which § 707(b)(4)(D) applies, certify that I have no knowled petition is incorrect.	ge arter an inquii	ry that the information in the schedules filed with the
to me and page.	/s/ William Bryan Irons Signature of Attorney for Debtor	Date	June 30, 2022 MM / DD / YYYY
	William Bryan Irons		
	Irons Law Firm, PLLC Firm name		
	3315 East 39th St. Tulsa, OK 74135-4631 Number, Street, City, State & ZIP Code		
	Contact phone (918) 392-0079	Email address	birons@ironslegal.com
	Bar number & State		<u> </u>

	Fill in this information to identify you	ur case and this filing:		
Debto		<u> </u>		
Dobio	First Name	Middle Name Last Name		
Debto	or 2 e, if filing) First Name	Middle Name Last Name		
United	d States Bankruptcy Court for the: NOF	RTHERN DISTRICT OF OKLAHOMA, TULSA DIVISION	<u> </u>	
Case	number			☐ Check if this is an
				amended filing
Offic	cial Form 106A/B			
Scł	nedule A/B: Proper	ty		12/15
think it informa	fits best. Be as complete and accurate as pation. If more space is needed, attach a separe very question.	s. List an asset only once. If an asset fits in more than one cossible. If two married people are filing together, both are arate sheet to this form. On the top of any additional pages at, or Other Real Estate You Own or Have an Interest In	equally responsible for supp	olying correct
1. Do y	ou own or have any legal or equitable inter	est in any residence, building, land, or similar property?		
	No. Go to Part 2.			
_	es. Where is the property?			
	co. This is also properly.			
David O	Describe Verry Vehicles			
Part 2:	Describe Your Vehicles			
3. Ca r □ N ■ Y		ehicles, motorcycles		
3.1	Make: Ford	Who has an interest in the property? Check one	Do not deduct secured cla the amount of any secured	
	Model: F350	Debtor 1 only	Creditors Who Have Claim	
	Year: 2019 Approximate mileage: 30000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other information:	☐ At least one of the debtors and another	entire property?	portion you own:
[VIN 1FT8W3DT5KEF49125			
	Mileage 30,000	☐ Check if this is community property (see instructions)	\$67,000.00	\$67,000.00
		(See Histiactions)		
3.2	Make: KTM	Who has an interest in the property? Check one	Do not deduct secured cla	ims or exemptions. Put
3.2	Model: Super Duke 1290	Debtor 1 only	the amount of any secured Creditors Who Have Claim	
	Year: 2020	Debtor 1 only Debtor 2 only	Current value of the	Current value of the
	Approximate mileage: 600	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	☐ At least one of the debtors and another		
	VIN VBKV69409LM923835 Mileage 600	Check if this is community property (see instructions)	\$17,000.00	\$17,000.00
	mples: Boats, trailers, motors, personal wa	nd other recreational vehicles, other vehicles, and a stercraft, fishing vessels, snowmobiles, motorcycle acces		

D	ebtor 1	Reynolds, Jo	oshua Kent	Case number (if	known) _	
5			the portion you own for all of your entrie		pages	\$84,000.00
Pa	art 3: De	scribe Your Perso	nal and Household Items			
			gal or equitable interest in any of the foll	lowing items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Example No	,	rnishings es, furniture, linens, china, kitchenware			
	Yes.	Describe	Out of the second			
			Sofa, chairs, end tables, lamps, tv w/chairs, refridgerator, washer, du utensils, dishes, beds, dreseer, cl	yer, small appliancs, cooking		\$1,500.00
7.	■ No	es: Televisions an	d radios; audio, video, stereo, and digital equ phones, cameras, media players, games	ipment; computers, printers, scanners; mus	sic collection	ns; electronic devices
8.	Collectile Example	oles of value es: Antiques and f	igurines; paintings, prints, or other artwork; bemorabilia, collectibles	pooks, pictures, or other art objects; stamp,	coin, or bas	eball card collections; other
9.	Example No	ent for sports an es: Sports, photog instruments	d hobbies graphic, exercise, and other hobby equipmen	t; bicycles, pool tables, golf clubs, skis; cand	oes and kay	aks; carpentry tools; musical
10	□ No	oles: Pistols, rifles	, shotguns, ammunition, and related equipn	nent		
	Yes.	Describe	Smith and Wassan 22 0mm AB4	=		\$1,000,00
_			Smith and Wesson 22, 9mm, AR1			\$1,000.00
11	□ No [′]		hes, furs, leather coats, designer wear, shoe	es, accessories		
			Dress, casual and work clothing			\$600.00
12	■ No		elry, costume jewelry, engagement rings, we	dding rings, heirloom jewelry, watches, gem	ıs, gold, silv	er
13	Examp ■ No	rm animals bles: Dogs, cats, b	irds, horses			
14	■ No	her personal and	I household items you did not already lis	t, including any health aids you did not	list	

De	ebtor 1	Reynolds, J	loshua k	(ent		Case number (if known)	
15				our entries from Part 3, i	ncluding any entries for pag	es you have attached for	\$3,100.00
Pa	rt 4: De	scribe Your Finan	icial Asset	S			
Do	you ow	vn or have any l	egal or ed	quitable interest in any o	f the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	□ No		-	ır wallet, in your home, in a	safe deposit box, and on hand	when you file your petition	
						Cash	\$50.00
17.	Examp				ertificates of deposit; shares in the same institution, list each. Institution name:	credit unions, brokerage house	es, and other similar
			17.1.	Checking Account	Checking Account: Arv	est #9624	\$76.72
19.	Non-pu joint v ■ No	renture	formation	Institution or issuer name nterests in incorporated about them	: and unincorporated busines	ses, including an interest in % of ownership:	an LLC, partnership, and
20.	Negoti Non-ne	iable instruments	include per ents are the formation a	ersonal checks, cashiers' c nose you cannot transfer to	and non-negotiable instrume hecks, promissory notes, and n someone by signing or deliveri	noney orders.	
21.	Examp ■ No	ment or pension bles: Interests in List each accoun	IRA, ERIS	A, Keogh, 401(k), 403(b),	thrift savings accounts, or other	er pension or profit-sharing pl	ans
22.	Your s		prepaym d deposits	you have made so that you	Institution name: u may continue service or use fritilities (electric, gas, water), tele		or others
	□ No [′]	· ·	with idilul	oras, propaia rent, public u	Institution name or individual	•	0. 0.1010
	■ Yes.			rity Deposit on al Unit	Security Deposit: Secur Landlord Citadel proper	rity Deposit Held By	\$800.00
	Annuiti ■ No □ Yes			c payment of money to you	ı, either for life or for a number o	of years)	

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

De	btor 1	Reynolds	s, Joshua Kent	Case number (if known)	
	=				
	■ No □ Yes		Institution name and description. Separately file the records of any in	terests.11 U.S.C. § 521(c):	
	Trusts, ■ No	equitable or	future interests in property (other than anything listed in line 1),	, and rights or powers exercisable	e for your benefit
		Give specific	information about them		
			, trademarks, trade secrets, and other intellectual property lomain names, websites, proceeds from royalties and licensing agreem	nents	
	☐ Yes.	Give specific	information about them		
	_Ехатр		s, and other general intangibles permits, exclusive licenses, cooperative association holdings, liquor lice	enses, professional licenses	
	■ No □ Yes.	Give specific	information about them		
Mc	onev or i	property owe	ed to you?		Current value of the
	,,				portion you own? Do not deduct secured claims or exemptions.
28.	Tax refu	unds owed to	o you		
	■ No				
	⊔ Yes. (Give specific i	information about them, including whether you already filed the returns	and the tax years	
29.	Family				
	Examp ■ No	les: Past due	or lump sum alimony, spousal support, child support, maintenance,	divorce settlement, property settler	nent
		Give specific i	information		
20	Other e	mounts com	neone owes you		
30.		les: Unpaid w	rages, disability insurance payments, disability benefits, sick pay, vacat cans you made to someone else	tion pay, workers' compensation, S	ocial Security benefits;
	■ No	Give specific	information		
		·			
31.		ts in insurand les: Health, di	ce policies isability, or life insurance; health savings account (HSA); credit, homed	owner's, or renter's insurance	
		Name the insu	urance company of each policy and list its value.		
	- 100.1	vario tro mo		eficiary:	Surrender or refund value:
32.	Any into If you a died.	erest in prop are the benefic	perty that is due you from someone who has died ciary of a living trust, expect proceeds from a life insurance policy, or an	re currently entitled to receive proper	ty because someone has
	■ No □ Yes	Give specific	information		
	— 100.	Cive opeome	inomatori.		
			I parties, whether or not you have filed a lawsuit or made a dema s, employment disputes, insurance claims, or rights to sue	and for payment	
		Describe eac	ch claim		
	Other c ■ No	ontingent an	nd unliquidated claims of every nature, including counterclaims of	of the debtor and rights to set off	claims
		Describe eac	ch claim		
	_ `	ancial assets	s you did not already list		
	■ No □ Ves	Give specific	information		

Debtor 1	Reynolds, Joshua Kent	Case number (if known)	
	the dollar value of all of your entries from Part 4, including any 4. Write that number here		\$926.72
Part 5: De	escribe Any Business-Related Property You Own or Have an Interest In.	List any real estate in Part 1.	
□ No. G	own or have any legal or equitable interest in any business-related project to Part 6. Go to line 38.	perty?	
— 165. V	GO to line 36.		
			Current value of the portion you own? Do not deduct secured claims or exemptions.
38. Accou	ınts receivable or commissions you already earned		
■ No □ Yes.	. Describe		
<i>Exam</i> ■ No	equipment, furnishings, and supplies pples: Business-related computers, software, modems, printers, copie Describe	rs, fax machines, rugs, telephones, desks, c	nairs, electronic devices
☐ No	inery, fixtures, equipment, supplies you use in business, and too	ols of your trade	
	Building tools, saws, materials, ladders	s, shelving, paint, and	\$5,000.00
41. Invent	torv		
■ No	•		
☐ Yes.	. Describe		
42. Interes ■ No	sts in partnerships or joint ventures		
☐ Yes.	. Give specific information about them Name of entity:	% of ownership:	
43. Custon	mer lists, mailing lists, or other compilations		
☐ Do yo	our lists include personally identifiable information (as defined in 11 U.S.	C. § 101(41A))?	
	■ No		
	Yes. Describe		
44. Any b i ■ No	usiness-related property you did not already list		
☐ Yes.	. Give specific information		
	the dollar value of all of your entries from Part 5, including any 5. Write that number here		\$5,000.00

Case 22-10616-M Document 1 Filed in USBC ND/OK on 06/30/22 Page 22 of 68

Debt	tor 1	Reynolds, Joshua Kent		Case number (if known)	
Part		scribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.	u Own or Have an Interes	t In.	
46. C	o you	own or have any legal or equitable interest in any farm-	or commercial fishing	-related property?	
	■ No.	Go to Part 7.			
	☐ Yes	. Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above		
		have other property of any kind you did not already list bles: Season tickets, country club membership	?		
	No Yes.	Give specific information			
54.	Add t	he dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	l: Total real estate, line 2			\$0.00
56.	Part 2	2: Total vehicles, line 5	\$84,000.00		
57.	Part 3	3: Total personal and household items, line 15	\$3,100.00		
58.	Part 4	l: Total financial assets, line 36	\$926.72		
59.	Part 5	5: Total business-related property, line 45	\$5,000.00		
60.	Part 6	6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	7: Total other property not listed, line 54	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$93,026.72	Copy personal property total	sal \$93,026.72
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$93,026.72

Case 22-10616-M Document 1 Filed in USBC ND/OK on 06/30/22 Page 23 of 68

	Fill in this	information to identify your	case:			
De	ebtor 1	Joshua Kent Reynolds				
			Middle Name	L	_ast Name	
	ebtor 2 ouse if, filing)	First Name	Middle Name	L	_ast Name	
					HOMA, TULSA DIVISION	
	inca otates barr	Tion	THERIT DIOTRIOT OF	ORL	TOWN, TOLON DIVIDION	
	nse number					☐ Check if this is an amended filing
O	fficial For	m 106C				
S	chedule	C: The Proper	rty You Cla	im	as Exempt	4/22
propout kno For special appropring to a second a	perty you listed or and attach to this wn). The each item of prescrific dollar amo blicable statutor ds—may be unla particular dolla	on Schedule A/B: Property (Office page as many copies of Part 2 pa	cial Form 106A/B) as you 2: Additional Page as no you must specify the you may claim the fu such as those for healt yever, if you claim and	ecessa amou all fair th aid exem	urce, list the property that you claim a ary. On the top of any additional page unt of the exemption you claim. O market value of the property bein s, rights to receive certain benefit	ng exempted up to the amount of any is, and tax-exempt retirement under a law that limits the exemption
	olicable statutor	the Property You Claim as E	exempt			
1.	Which set of e	xemptions are you claiming	? Check one only, even	if you	ır spouse is filing with you.	
	_	ming state and federal nonbank	•	-		
	_	ming federal exemptions. 11 U		0.0.0	5. 3 022(b)(b)	
2		rty you list on Schedule A/B	• ()()	mnt f	ill in the information below	
۷.		Specific laws that allow exemption				
	Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own Copy the value from Schedule A/B Amount of the exemption you claim Check only one box for each exemption.			Specific laws that allow exemption
	Ford		\$67,000.00		\$3,000.00	31 Okla. St. § 1(A)(13)
	F350 2019 30000 Line from Sche	dule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
		, end tables, lamps, tv,	\$1,500.00			31 Okla. St. § 1(A)(3)
	refridgerator	esk, table w/chairs, r, washer, dryer, small ooking utensils, dishes, er, chests, linens dule A/B 6.1		•	100% of fair market value, up to any applicable statutory limit	
		/esson 22, 9mm, AR15	\$1,000.00			31 Okla. St. § 1(A)(14)
	Line from Sche	dule A/B: 1 U. 1			100% of fair market value, up to any applicable statutory limit	
		al and work clothing	\$600.00			31 Okla. St. § 1(A)(7)
	Line from Sche	uule AVD. II.I			100% of fair market value, up to any applicable statutory limit	
		ls, saws, materials,	\$5,000.00			31 Okla. St. § 1(A)(5)
	ladders, she Line from Sche	lving, paint, and lumber dule A/B: 40.1		•	100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Case 22-10616-M Document 1 Filed in USBC ND/OK on 06/30/22 Page 24 of 68

Del	otor 1	Reynolds, Joshua Kent	Case number (if known)	
3.	•	you claiming a homestead exemption of more than \$189,050? ject to adjustment on 4/01/25 and every 3 years after that for cases filed	on or after the date of adjustment.)	
		No		
		Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?		
		□ No		
		☐ Yes		

Official Form 106C

Fill in this inf	ormation to ident	ify your case.			
FIII III UIIS IIII	ormation to ident	ny your case.			
	loshua Kent Re irst Name	,			
	irst Name	Middle Name Last Name			
Debtor 2 (Spouse if, filing)	irst Name	Middle Name Last Name			
United States Bankru	otcy Court for the:	NORTHERN DISTRICT OF OKLAHOMA, TU	ILSA DIVISION		
Case number					
(if known)				☐ Check	if this is an
				amend	led filing
Official Form 1	06D				
		Miles I I a Claire Care			
Schedule D:	Creditors	Who Have Claims Secured	by Property	/	12/15
		two married people are filing together, both are equ , number the entries, and attach it to this form. On th			
1. Do any creditors have	claims secured by	vour property?			
	-	s form to the court with your other schedules. You	have nothing else to ren	oort on this form	
_		•	riave notining else to rep	ort on this form.	
Yes. Fill in all o	f the information be	elow.			
Part 1: List All Se	cured Claims		Column A	Column B	Column C
		nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
		al order according to the creditor 's name.	Do not deduct the	that supports this	portion
2.1 Freedom Roa	d Einanaial	Describe the property that secures the claim:	value of collateral.	claim	If any
2.1 Freedom Roa Creditor's Name	iu Filialiciai	2020 KTM Super Duke 1290	\$20,000.00	\$17,000.00	\$3,000.00
		VIN VBKV69409LM923835 Mileage			
10509 Profes	cional Cir	600			
Ste 100	Sional Cil	As of the date you file, the claim is: Check all that			
Reno, NV 895	21-4883	apply. Contingent			
Number, Street, City,	State & Zip Code	☐ Unliquidated			
		□ Disputed			
Who owes the debt?	Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		☐ An agreement you made (such as mortgage or sec	ured		
Debtor 2 only		car loan)			
☐ Debtor 1 and Debtor	2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the de	btors and another	☐ Judgment lien from a lawsuit			
Check if this claim r community debt	elates to a	Other (including a right to offset)			
Date debt was incurred	06/15/2021	Last 4 digits of account number 6153			

Debt	or 1 Joshua Kent Reynolds		Case number (if known)		
	First Name Middle N	ame Last Name			
2.2	Western Sun Credit Union	Describe the property that secures the claim:	\$64,000.00	\$67,000.00	\$0.00
	Creditor's Name 4620 W Kenosha St Broken Arrow, OK 74012-8966	2019 Ford F350 VIN 1FT8W3DT5KEF49125 Mileage 30,000 As of the date you file, the claim is: Check all that apply. ☐ Contingent			
	Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who	owes the debt? Check one.	Nature of lien. Check all that apply.			
_	ebtor 1 only ebtor 2 only	An agreement you made (such as mortgage or so car loan)	ecured		
□ D	ebtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
□ A	least one of the debtors and another	☐ Judgment lien from a lawsuit			
	heck if this claim relates to a ommunity debt	Other (including a right to offset)			
Date	debt was incurred <u>03/01/2021</u>	Last 4 digits of account number 2388	<u> </u>		
Add	the dollar value of your entries in Co	lumn A on this page. Write that number here:	\$84,000.00		
	s is the last page of your form, add the that number here:	ne dollar value totals from all pages.	\$84,000.00	7	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

								•	
Fil	l in this info	ormation to identify you	ır case:						
Debto	or 1	Joshua Kent Rey First Name	/NOIGS Middle N	lame	Last Name				
Debto	or 2						ĺ		
(Spous	e if, filing)	First Name	Middle N	lame	Last Name				
Unite	d States Ba	nkruptcy Court for the:	NORTHERN	N DISTRICT OF	OKLAHOMA, T	ULSA DIVISI	ON		
Case (if know	number _							_	Check if this is an amended filing
		n 106E/F							
<u>Sch</u>	<u>edule E</u>	:/F: Creditors W	/ho Have	Unsecure	d Claims				12/15
Schedi D: Cred the Co	ule G: Execu ditors Who H ntinuation Pa umber (if kno	lave Claims Secured by Pi age to this page. If you ha	ired Leases (Of roperty. If more ve no information	fficial Form 106G). e space is needed, ion to report in a P	. Do not include copy the Part yo	any creditors ou need, fill it o	with partially sec out, number the	cured claims entries in the	that are listed in Schedule boxes on the left. Attach
		ors have priority unsecure							
_	No. Go to P		a oranno aganto	,					
	Yes.	art Z.							
_	⊒ res.								
Part 2	2: List A	II of Your NONPRIORIT	Y Unsecured	Claims					
3. D	o any credito	ors have nonpriority unsec	cured claims ag	jainst you?					
	No. You ha	ve nothing to report in this p	art. Submit this f	form to the court wi	th your other sche	edules.			
	Yes.								
ur	nsecured clair an one credit	r nonpriority unsecured cl m, list the creditor separately or holds a particular claim, l	y for each claim.	. For each claim list	ed, identify what t	type of claim it i	is. Do not list clair	ms already inc	luded in Part 1. If more
									Total claim
4.1		an Express y Creditor's Name		Last 4 digits of a	ccount number	1002			\$28,000.00
	rvonphoni	y Orcanor 3 Name		When was the de	ebt incurred?				
		c 650448 TX 75265-0448							_
		treet City State Zip Code		As of the date yo	ou file, the claim	is: Check all th	nat apply		
	Who incu	rred the debt? Check one.							
	Debtor	1 only		☐ Contingent					
	☐ Debtor	2 only		☐ Unliquidated					
	☐ Debtor	1 and Debtor 2 only		☐ Disputed					
	☐ At leas	st one of the debtors and an	other	Type of NONPRI	ORITY unsecure	d claim:			
	☐ Check	if this claim is for a com	munity	☐ Student loans					
	debt	im subject to offset?		Obligations are		aration agreem	ent or divorce tha	t you did not	
	■ No	,		Debts to pensi		ng plans, and o	ther similar debts		
	☐ Yes			Other. Specify	Credit Car	d			
				, ,					_

Debto	1 Reynolds, Joshua Kent	Case number (f known)	
4.2	Ascension St John Owasso Nonpriority Creditor's Name	Last 4 digits of account number 5637	\$564.08
	Nonpholity Cleditor's Name	When was the debt incurred?	
	PO Box 42008 Phoenix, AZ 85080-2008 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
4.3	Bank of Oklahoma Nonpriority Creditor's Name	Last 4 digits of account number 0881	\$44,000.00
	Nonpholity Cication 3 Name	When was the debt incurred?	
	PO Box 2300		
	Tulsa, OK 74102-2300		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Line of Credit & overdrawn checking	
4.4	Bank of Oklahoma Visa	Last 4 digits of account number 9837	\$19,000.00
	Nonpriority Creditor's Name		ψ13,000.00
		When was the debt incurred?	
	PO Box 790408		
	Saint Louis, MO 63179-0408 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Oneok an that apply	
	■ Debtor 1 only	☐ Contingent	
	_ ′	_	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		
	□ res	■ Other. Specify Credit Card's 6674 13,000.0, 9837 6,000.00	

Debto	Reynolds, Joshua Kent	Case number (f known)	
4.5	Best Buy Nonpriority Creditor's Name	Last 4 digits of account number 5595	\$2,000.00
	Nonpholity Creditor's Name	When was the debt incurred?	
	PO Box 790441 Saint Louis, MO 63179-0441 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		
	□ Yes	■ Other. Specify Credit Card	
4.6	Broken Arrow Fire Department Nonpriority Creditor's Name	Last 4 digits of account number 6934	\$1,679.43
	C/O Utility Department	When was the debt incurred?	
	220 S 1st St		
	Broken Arrow, OK 74012-4152	_	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.7	Capital One Bank Nonpriority Creditor's Name	Last 4 digits of account number 7805	\$800.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	PO Box 85015		
	Richmond, VA 23285-5015	_	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	

Case 22-10616-M Document 1 Filed in USBC ND/OK on 06/30/22 Page 30 of 68

Debto	Reynolds, Joshua Kent	Case number (f known)	
4.8	Citibank Nonpriority Creditor's Name	Last 4 digits of account number 4160	\$13,000.00
	Honpholity creditor of Hamo	When was the debt incurred?	
	PO Box 6004		
	Sioux Falls, SD 57117-6004 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Check all that apply	
	Debtor 1 only	☐ Contingent	
		•	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		
	□ res	Other. Specify Credit Card	
4.9	Credit One Visa	Last 4 digits of account number 4796	\$500.00
	Nonpriority Creditor's Name	 	
	DO D	When was the debt incurred?	
	PO Box 60500		
	City of Industry, CA 91716-0500 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Credit Card	
4.10	E A Stone	Last 4 digits of account number 2388	\$8,000.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	6523 E Independence St		
	Tulsa, OK 74115-7861	_	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Other	

Case 22-10616-M Document 1 Filed in USBC ND/OK on 06/30/22 Page 31 of 68

Debtor	1 Reynolds, Joshua Kent	Case number (f known)	
4.11	Express Wellness Urgent Care Nonpriority Creditor's Name	Last 4 digits of account number 6013	\$135.00
	Nonphonty Creditor's Name	When was the debt incurred?	
	503 S Aspen Ave Broken Arrow, OK 74012-2296		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.12	Home Depot	Last 4 digits of account number 6937	\$600.00
	Nonpriority Creditor's Name		
	DO D 0405	When was the debt incurred?	
	PO Box 6497		
	Sioux Falls, SD 57117-6497 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐Yes	■ Other. Specify Credit Card	
4.13	Lowes/Synchrony Bank Nonpriority Creditor's Name	Last 4 digits of account number 5803	\$3,500.00
	Nonphonty Creditor's Name	When was the debt incurred?	
	PO Box 965003		
	Orlando, FL 32896-5003	_	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card	

Debtor	1 Reynolds	s, Joshua Kent		Case n	umber (if known)			
4.14	Western Su	un Credit Union	Last 4 digits of account number	2388	3	\$15,000.00		
	Nonphonty Cred	uitoi s ivairie	When was the debt incurred?	05/1	0/2021			
	4620 W Ker					•		
		ow, OK 74012-8966 City State Zip Code	As of the date you file, the claim	ia. Chaal	k all that apply			
		the debt? Check one.	As of the date you me, the claim	is. Checi	к ан тат арріу			
	■ Debtor 1 on		Пол					
		•	Contingent					
	Debtor 2 on	•	☐ Unliquidated					
	Debtor 1 and		Disputed	ما جاجات				
		of the debtors and another	Type of NONPRIORITY unsecure ☐ Student loans	u ciaim:				
	☐ Check if thi debt	s claim is for a community						
		bject to offset?	report as priority claims	aration ac	greement or divorce that you did not			
	■ No		Debts to pension or profit-sharir	ng plans	and other similar debts			
	☐ Yes				and since simmar desire			
	⊔ Yes		Other. Specify Personal L	.oan				
4.15	Windstream	n	Last 4 digits of account number	2436	3	\$400.00		
	Nonpriority Cred		-		<u>- </u>	Ψ-100.00		
	4.14.0.1.0.		When was the debt incurred?			•		
	1 W 3rd St Tulsa, OK 7	7/103_3532						
	Number Street	City State Zip Code	As of the date you file, the claim	is: Checl	k all that apply			
		the debt? Check one.						
	■ Debtor 1 on	ly	☐ Contingent					
	Debtor 2 on	ly	☐ Unliquidated					
	Debtor 1 and	•	Disputed					
		of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if thi	s claim is for a community	☐ Student loans					
	debt	bject to offset?	Obligations arising out of a separeport as priority claims	aration aç	greement or divorce that you did not			
	■ No		☐ Debts to pension or profit-sharir	ng plans,	and other similar debts			
	Yes		Other Specify Cellular					
						•		
Part 3:	List Others	s to Be Notified About a Debt 1	That You Already Listed			_		
is tryi have i notifie	ng to collect fro more than one c ed for any debts	m you for a debt you owe to some reditor for any of the debts that y in Parts 1 or 2, do not fill out or s		Parts 1	or 2, then list the collection agency	here. Similarly, if you		
Part 4:		nounts for Each Type of Unse						
	the amounts of of unsecured cla		s. This information is for statistical r	eporting	purposes only. 28 U.S.C. §159. Add	the amounts for each		
					Total Claim			
Total ale	6a.	Domestic support obligations		6a.	\$0.00	-		
Total cla		Taxes and certain other debts y	ou owe the government	6b.	\$ 0.00			
	6c.	Claims for death or personal inj	ury while you were intoxicated	6c.	\$ 0.00	-		
	6d.	Other. Add all other priority unsec	ured claims. Write that amount here.	6d.	\$ 0.00	- -		
	6e.	Total Priority. Add lines 6a through	gh 6d.	6e.	\$0.00	_		
	C.f	Student loans		£f	Total Claim			
Total cla	6f. aims	Student loans		6f.	\$	-		
from Pa			aration agreement or divorce that	6~	\$ 0.00			
	6h.	you did not report as priority cla Debts to pension or profit-shari	aims ng plans, and other similar debts	6g. 6h.	\$ 0.00	-		
	2		·,		÷ U.UU			

0.00

Debtor 1 Reynolds, Joshua Kent

Other. Add all other nonpriority unsecured claims. Write that amount here.

6j. Total Nonpriority. Add lines 6f through 6i.

Case number (f known)

^{61.} \$ 137,178.51

6j. \$ **137,178.51**

Case 22-10616-M Document 1 Filed in USBC ND/OK on 06/30/22 Page 34 of 68

Fill in th	nis information to identi	fy your case:			1
Debtor 1	Joshua Kent Rey	nolds			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OKLAHOMA, TULSA DIV	/ISION	
Case number					☐ Check if this is an
					amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

Citadel Properties
PO Box 470014
Tulsa, OK 74147-0014

Lease Dated 02/01/2022 - 01/31/2023

Case 22-10616-M Document 1 Filed in USBC ND/OK on 06/30/22 Page 35 of 68

Fill	in this information to identif	y your case:			
Debtor 1	Joshua Kent Rey	nolds			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	j) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF OKLAHOMA, TULS	A DIVISION	
Case number (if known)	er				☐ Check if this is an amended filing
Sched	Form 106H ule H: Your Cod				12/15
are filing tog and number case numbe	gether, both are equally resp the entries in the boxes on r (if known). Answer every o	onsible for supplying co the left. Attach the Addit Juestion.	prect information. If mo ional Page to this page.	re space is needed, copy On the top of any Additi	s possible. If two married people
1. Do y	ou have any codebtors? (If y	ou are filing a joint case, d	o not list either spouse as	a codebtor.	
■ No □ Yes					
Californ —	in the last 8 years, have you ia, Idaho, Louisiana, Nevada, Go to line 3.				ates and territories include Arizona,
3. In Colu line 2 a 106D), 3	gain as a codebtor only if th Schedule E/F (Official Form	ors. Do not include your at person is a guarantor	spouse as a codebtor if or cosigner. Make sure	you have listed the cred	h you. List the person shown in litor on Schedule D (Official Forn E/F, or Schedule G to fill out
	olumn 1: Your codebtor ame, Number, Street, City, State and Z	P Code		Column 2: The credit	or to whom you owe the debt hat apply:
3.1 _N	ame			_ ☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line	·
	umber Street ity	State	ZIP Code	_	
3.2 _N	ame			_ □ Schedule D, line □ Schedule E/F, line □ Schedule G, line	>
	umber Street ity	State	ZIP Code	_	

Fill	in this information to identify your ca	se:							
Del	otor 1 Joshua Kent	Reynolds							
1 -	otor 2 ouse, if filing)				_				
Uni	ted States Bankruptcy Court for the:	NORTHERN DISTRIC	T OF OKLAHO	MA, TULSA	_				
	se number nown)						ed filing ent show	ving postpetition of	chapter 13
0	fficial Form 106I					MM / DD/	YYYY		
S	chedule I: Your Inco	ome							12/15
sup spo atta	as complete and accurate as possil plying correct information. If you a use. If you are separated and your ch a separate sheet to this form. O Describe Employment	re married and not filing spouse is not filing with	g jointly, and you	our spouse is nclude informa	living ation a	with you, included in the with your spo	ide infori use. If m	mation about your ore space is ne	our eded,
1.	Fill in your employment information.		Debtor 1			Debtor	2 or non	-filing spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status		■ Employed□ Not employed			☐ Employed ☐ Not employed		
	employers.	Occupation							
	Include part-time, seasonal, or self-employed work.	Employer's name							
	Occupation may include student or homemaker, if it applies.	. Employer's address							
		How long employed th	iere?						
Par	t 2: Give Details About Mont	thly Income							
	mate monthly income as of the dates so you are separated.	te you file this form. If yo	ou have nothing	to report for any	/ line, v	vrite \$0 in the s	ace. Incl	ude your non-filir	ng spouse
If yo	u or your non-filing spouse have more ce, attach a separate sheet to this forn	than one employer, comb	oine the informat	ion for all emplo	yers fo	or that person o	the lines	s below. If you ne	ed more
					F	or Debtor 1		Debtor 2 or filing spouse	
2.	List monthly gross wages, salary deductions). If not paid monthly, ca			2.	\$_	0.00	\$	N/A	
3.	Estimate and list monthly overting	ne pay.		3.	+\$_	0.00	+\$	N/A	
4.	Calculate gross Income. Add line	e 2 + line 3.		4.	\$_	0.00	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

Deb	tor 1	Reynolds, Joshua Kent	_	Case	number (if known)		
				For	Debtor 1	For Debto	
	Cop	py line 4 here	4.	\$	0.00	\$	N/A
5.	List	t all payroll deductions:					
0.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A
	5b.	Mandatory contributions for retirement plans	5a. 5b.	^Ψ _	0.00	\$	N/A
	5c.	Voluntary contributions for retirement plans	5c.	* *	0.00	\$	N/A
	5d.	Required repayments of retirement fund loans	5d.	ς \$	0.00	\$	N/A
	5e.	Insurance	5e.	_{\$} -	0.00	\$	N/A
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	N/A
	5g.	Union dues	5g.	_{\$} -	0.00	\$	N/A
	5h.	Other deductions. Specify:	5h.+	· · · —		+ \$	N/A
6.		d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	<u>,</u> —	0.00	\$	N/A
		• •		* — \$		\$	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	» —	0.00	Φ	N/A
8.	List 8a.	t all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total					
		monthly net income.	8a.	\$	6,831.00	\$	N/A
	8b.	Interest and dividends	8b.	\$_	0.00	\$	<u>N/A</u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce		Φ.	0.00	c	N/A
		settlement, and property settlement.	8c.	\$_	0.00	\$	N/A
	8d.	Unemployment compensation	8d.	\$_	0.00	\$	N/A
	8e. 8f.	Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8e. 8f.	\$_ \$	0.00	\$ \$	N/A N/A
	8g.	Pension or retirement income	— 8g.	\$ _	0.00	\$	N/A
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	6,831.00	\$	N/A
10.		culate monthly income. Add line 7 + line 9. If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	•	6,831.00 + \$_	N/A	A = \$ 6,831.0
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule lude contributions from an unmarried partner, members of your household, your deer friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not avecify:	ependen		·		· +\$ 0. 0
12.		d the amount in the last column of line 10 to the amount in line 11. The resulte that amount on the Summary of Schedules and Statistical Summary of Certain			•	40	s6,831.0
13.	_	you expect an increase or decrease within the year after you file this form?	?				Combined monthly income
		No.					

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	ation to identify yo	ur case:			ı		
Debt		Joshua Kent		de		Chec	ck if this is:	
		Joshua Rem	Reynon	43			An amended filing	
Debt (Spo	tor 2 buse, if filing)						A supplement show expenses as of the	ring postpetition chapter 13
(Spo	Juse, ii iiiiig)						expenses as or the	Tollowing date.
Unite	ed States Bankr	ruptcy Court for the:		IERN DISTRICT OF OKLA DIVISION	.HOMA,		MM / DD / YYYY	
	e number nown)							
└ Of	fficial Fo	orm 106J				J		
Sc	chedule	J: Your E	 Expen	ses				12/1
Be a	as complete a	and accurate as	possible. eded, attac	If two married people are th another sheet to this fo	filing together, bot orm. On the top of a	h are equal any addition	ly responsible for s al pages, write you	supplying correct ur name and case numbe
Part	t 1: Descr	ribe Your Housel	nold					
1.								
	■ No. Go to	o line 2. e s Debtor 2 live ir	n a senara	te household?				
	□ 163. D00		та эсрага	ne nousenoia :				
	= ::	-	t file Offici	al Form 106J-2, Expenses	for Separate Housel	noldof Debto	r 2.	
2.	Do you have	e dependents?	□ No					
۷.	Do not list D	•		Fill out this information for	Dependent's relat	ionshin to	Dependent's	Does dependent
	Debtor 2.	ebioi i and	Yes.	each dependent	Debtor 1 or Debto		age	live with you?
	Do not state	the						□ No
	dependents				Son		8	Yes
								□ No
								☐ Yes
								□ No □ Yes
								□ No
								☐ Yes
3.	Do your exp	oenses include		No				
		f people other th d your depender	ıan ┌	Yes				
Part		ate Your Ongoir					mlamant in a Chan	ton 40 occords non-out
exp				ptcy filing date unless yo is filed. If this is a suppl				
				overnment assistance if				
	ue of such as icial Form 10		/e include	d it on Schedule I: Your I	ncome		Your exp	enses
4.		or home ownersh and any rent for the		ses for your residence. In lot.	clude first mortgage	4. \$	S	1,300.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$	5	0.00
		erty, homeowner's,	or renter's	insurance		4b. \$		45.00
	4c. Home	maintenance, re	pair, and u	pkeep expenses		4c. \$	S	0.00
		owner's associati				4d. \$		0.00
5	Additional r	mortaane navme	nte for vo	ur residence such as hon	ne equity loans	5 9	:	0.00

ebtor	Reynolds, Joshua Kent	Case numl	per (if known)	
S. Ut	ilities:			
6a	. Electricity, heat, natural gas	6a.	\$	325.00
6b	. Water, sewer, garbage collection	6b.	\$	150.00
6c	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	230.00
6d	Other. Specify: Security System	6d.	\$	40.00
Fo	od and housekeeping supplies	 7.	\$	800.00
	ildcare and children's education costs	8.	\$	810.00
CI	othing, laundry, and dry cleaning	9.	\$	125.00
	rsonal care products and services	10.	\$	100.00
	edical and dental expenses	11.	·	25.00
	ansportation. Include gas, maintenance, bus or train fare.		<u> </u>	
	not include car payments.	12.	\$	200.00
. Er	tertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	150.00
. Cł	aritable contributions and religious donations	14.	\$	200.00
. In:	surance.		-	
Do	not include insurance deducted from your pay or included in lines 4 or 20.			
15	a. Life insurance	15a.	\$	65.50
15	b. Health insurance	15b.	\$	650.00
15	c. Vehicle insurance	15c.	\$	0.00
15	d. Other insurance. Specify:	15d.	\$	0.00
. Ta	xes. Do not include taxes deducted from your pay or included in lines 4 or 20.			<u> </u>
Sp	ecify:	16.	\$	0.00
	stallment or lease payments: a. Car payments for Vehicle 1	17a.	\$	1,050.00
	b. Car payments for Vehicle 2	17b.		350.00
		17b.	·	
	c. Other Specify:		·	0.00
	d. Other. Specify:	17d.	a	0.00
	our payments of alimony, maintenance, and support that you did not report as ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
	her payments you make to support others who do not live with you.		\$	0.00
	ecify:	19.		0.00
	her real property expenses not included in lines 4 or 5 of this form or on Sched		r Income.	
	a. Mortgages on other property	20a.		0.00
20	b. Real estate taxes	20b.	·	0.00
-	c. Property, homeowner's, or renter's insurance	20c.	·	0.00
	d. Maintenance, repair, and upkeep expenses	20d.	·	0.00
	e. Homeowner's association or condominium dues	20a. 20e.	·	0.00
		206.		
			+φ	100.00
	Iculate your monthly expenses			
	a. Add lines 4 through 21.		\$	6,715.50
22	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22	c. Add line 22a and 22b. The result is your monthly expenses.		\$	6,715.50
. Ca	Iculate your monthly net income.			
23	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	6,831.00
	b. Copy your monthly expenses from line 22c above.	23b.	-\$	6,715.50
23	c. Subtract your monthly expenses from your monthly income.	23c.	\$	115.50
	The result is your monthly net income.	200.	<u> </u>	5.00
Fo	you expect an increase or decrease in your expenses within the year after your example, do you expect to finish paying for your car loan within the year or do you expect you diffication to the terms of your mortgage?			e or decrease because of a
	No.			
	Yes. Explain here:			

Fill in this i	nformation to identify ye	our case:			
Debtor 1	Joshua Kent Rey				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	Γ OF OKLAHOMA, TULSA D	DIVISION	
Case number					
(if known)					☐ Check if this is an amended filing
If two married po You must file the obtaining mone	eople are filing together	, both are equally respon le bankruptcy schedules n connection with a bank		t information. aking a false stateme	ent, concealing property, or or imprisonment for up to 20
Sig	ın Below				
Did you pa	ay or agree to pay some	one who is NOT an attor	ney to help you fill out ban	kruptcy forms?	
■ No					
☐ Yes.	Name of person				ruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the sum	mary and schedules filed w	vith this declaration a	and
X /s/.lo	shua Kent Reynolds		X		
Joshu	ia Kent Reynolds ure of Debtor 1		Signature of D	ebtor 2	
Date	June 30, 2022		Date		

			•	
	Fill in this information to identify your case:			
Del	ebtor 1 Joshua Kent Reynolds			
	First Name Middle Nar	ne Last Name		
	ebtor 2 pouse if, filing) First Name Middle Nar	me Last Name		
Uni	nited States Bankruptcy Court for the: NORTHERN	DISTRICT OF OKLAHOMA, TULSA DIVISION		
Cas	ase number			
	known)			ck if this is an
			amer	nded filing
	v 15 4000			
	official Form 106Sum	Manager I Contain Otation I Information		
	-	ities and Certain Statistical Information d people are filing together, both are equally responsible for s	supplying	12/15
info	formation. Fill out all of your schedules first; then co	mplete the information on this form. If you are filing amended		
	our original forms, you must fill out a new Summary a	and check the box at the top of this page.		
Par	art 1: Summarize Your Assets			
				assets of what you own
	Oaka kale A/B Bassasta (O/Cala Essas 400A/B)		value	or wriat you own
1.		/B	\$	0.00
	1b. Copy line 62, Total personal property, from Sche	edule A/B	\$	93,026.72
	1c. Copy line 63, Total of all property on Schedule A	/B	\$	93,026.72
Par	art 2: Summarize Your Liabilities			
			Vour	liabilities
				nt you owe
2.		v Property (Official Form 106D) claim, at the bottom of the last page of Part 1 of Schedule D	\$	84.000.00
•			<u> </u>	
3.		ns (Official Form 106E/F) cured claims) from line 6e G ichedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority ur	secured claims) from line 6j o3chedule E/F	\$	137,178.51
		Your total liabilities	\$	221,178.51
Pai	art 3: Summarize Your Income and Expenses			
4.		Schedule I	\$	6,831.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedu	ile J	\$	6,715.50
Pai	art 4: Answer These Questions for Administrative	and Statistical Records		
6.	. Are you filing for bankruptcy under Chapters 7, 1	1. or 13?		
		e form. Check this box and submit this form to the court with your of	her sched	ules.
	■ Yes			
7.	What kind of debt do you have?			
	Your debts are primarily consumer debts. C purpose." 11 U.S.C. § 101(8). Fill out lines 8-9c	onsumer debts are those "incurred by an individual primarily for a p	ersonal, fa	mily, or household

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the

court with your other schedules.

Debtor 1 Reynolds, Joshua Kent Case number (if known)

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____6,830.91

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	l claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	Fill in this	information to identi	fy your case:						
De	btor 1	Joshua Kent Re	ynolds Middle Name	Las	st Name				
	btor 2								
(Sp	ouse if, filing)	First Name	Middle Name	Las	st Name				
Un	ited States Ban	kruptcy Court for the:	NORTHERN DISTRICT O	F OKLAH	OMA, TULSA DIV	SION			
	se number						_	heck if this is an nended filing	
St		of Financial	Affairs for Individ					04/22	
info	rmation. If mo		ole. If two married people are attach a separate sheet to the						
Pa	rt 1: Give De	etails About Your Ma	rital Status and Where You	Lived Bef	ore				
1.	What is your	current marital statu	s?						
	☐ Married								
	■ Not marr	ied							
2.	During the las	st 3 years, have you	lived anywhere other than w	here you	live now?				
	□ No								
	_	all of the places you liv	red in the last 3 years. Do not in	nclude who	ere you live now.				
	Debtor 1:		Dates Debtor 1 I	ived	Debtor 2 Prior Ad	dress:		Dates Debtor 2 lived there	
	821 W Wad Broken Arı	co St row, OK 74011-28 ²	From-To: 6/2010 - 9/201		☐ Same as Debtor 1		☐ Same as Debtor 1 From-To:		
	es and territorie No Yes. Mak	s include Árizona, Cal	er live with a spouse or lega fornia, Idaho, Louisiana, Neva edule H: Your Codebtors (Office Income	ada, New	Mexico, Puerto Rio				
4.	Fill in the total	amount of income yo	ployment or from operating a received from all jobs and al ave income that you receive to	ll business	ses, including part-	time activities.	ious calenda	ar years?	
	□ No ■ Yes. Fill	in the details.							
			Debtor 1			Debtor 2			
			Sources of income Check all that apply.		income deductions and ons)	Sources of inc		Gross income (before deductions and exclusions)	
	-	of current year until for bankruptcy:	☐ Wages, commissions, bonuses, tips		\$40,986.00	☐ Wages, combonuses, tips	ımissions,		
			Operating a business			Operating a	business		

Official Form 107

Debtor 1 Reynolds, Joshua Kent				Case number (if known)				
			Debtor 1		Debtor 2			
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)	
For last calendar year: (January 1 to December 31, 2021)		r 31, 2021)	☐ Wages, commissions, bonuses, tips	\$0.00	☐ Wages, combonuses, tips	ımissions,		
			Operating a business		☐ Operating a	business		
	calendar year b ry 1 to Decembe		☐ Wages, commissions, bonuses, tips	\$2,862.00	☐ Wages, combonuses, tips	ımissions,		
			Operating a business		☐ Operating a	business		
	calendar year: ry 1 to Decembe	r 31, 2019)	■ Wages, commissions, bonuses, tips	\$94,855.00	☐ Wages, combonuses, tips	imissions,		
			Operating a business		☐ Operating a	business		
	Yes. Fill in the o	details.	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)	
				exclusions)			,	
Part 3:	List Certain F	ayments You	Made Before You Filed for E	Bankruptcy				
6. Are	No. Neither I	Debtor 1 nor D	's debts primarily consumer Debtor 2 has primarily consult personal, family, or household	mer debts. Consumer debts	are defined in 11 L	J.S.C. § 101(8	3) as "incurred by an	
	– ~	•	ore you filed for bankruptcy, did	you pay any creditor a total of	\$7,575* or more?			
	□ _{No.} □ _{Yes}	Go to line	7. each creditor to whom you paid	a total of \$7 575* or more in o	one or more navme	nts and the to	ntal amount you naid that	
		creditor. Do payments to	o not include payments for don to an attorney for this bankrupto t on 4/01/25 and every 3 years a	nestic support obligations, su y case.	ch as child suppor	rt and alimon		
•	Yes. Debtor 1	or Debtor 2 o	or both have primarily consul ore you filed for bankruptcy, did	mer debts.		,		
	□ _{No.}	Go to line	7.					
	■ Yes	List below	each creditor to whom you paid for domestic support obligations					
Cı	editor's Name a	nd Address	Dates of payme		Amount you	Was this p	payment for	
				paid	still owe			

Del	Debtor 1 Reynolds, Joshua Kent		Cas	e number (if known)		
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payme	ent for
	Western Sun Credit Union 4620 W Kenosha St Broken Arrow, OK 74012-8966	03/22, 04/22, 05/22	\$3,150.00	\$64,000.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayr ☐ Suppliers or v	
	Freedom Road Financial 10509 Professional Cir Ste 100 Reno, NV 89521-4883	03/22, 04/22, 05/22	\$1,050.00	\$20,000.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayr ☐ Suppliers or v ☐ Other Moto	vendors
7.	Within 1 year before you filed for bankruptour Insiders include your relatives; any general partry which you are an officer, director, person in conbusiness you operate as a sole proprietor. 11 U No Yes. List all payments to an insider.	ners; relatives of any genera trol, or owner of 20% or mor	ll partners; partnership re of their voting secu	ps of which you are rities; and any man	a general partner; aging agent, includ	ling one for a
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this	payment
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cosig No Yes. List all payments to an insider		ments or transfer an	y property on acc	count of a debt th	at benefited an
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this	
Do	t 4: Identify Legal Actions, Repossession	a and Faranlacuras	paid	Still Owe	include creditor	s name
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury of and contract disputes. No Yes. Fill in the details.	y, were you a party in any				ody modifications,
	Case title	Nature of the case	Court or agency		Status of the ca	ase
10.	Case number Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		rty repossessed, fo	reclosed, garnish	ed, attached, seiz	ed, or levied?
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened				property
11	Within 00 days before you filed for bentann	tov did onv oroditor incl	uding a bank as fina	noial inatitution	not off any amaii	to from your

Deb	otor 1 F	Reynolds, Joshua Kent		Case numbe	r (if known)	
	account	s or refuse to make a payment be	ocalico v	ou owed a debt?		
	■ No	s of refuse to make a payment be	cause y	ou owed a debt:		
	☐ Yes	s. Fill in the details.				
	Credito	or Name and Address	Des	scribe the action the creditor took	Date action was taken	Amount
12.		year before you filed for bankru pointed receiver, a custodian, or		s any of your property in the possession of an a official?	assignee for the benefi	t of creditors, a
	■ No	3				
Par	t 5: Li	st Certain Gifts and Contribution	s			
	<u> </u>			d you give any gifts with a total value of more tl	nan \$600 per person?	
	■ No	s. Fill in the details for each gift.				
		ith a total value of more than \$60	0 ner	Describe the gifts	Dates you gave	Value
	person	·	о ро.	Document and guite	the gifts	Valuo
	Person Addres	to Whom You Gave the Gift and s:				
14.	Within 2	years before you filed for bankr	uptcy, di	d you give any gifts or contributions with a tota	I value of more than \$6	600 to any charity?
	Yes	s. Fill in the details for each gift or co	ntribution	n.		
	more the	r contributions to charities that than \$600 's Name S (Number, Street, City, State and ZIP Code		Describe what you contributed	Dates you contributed	Value
	St. An	ne Catholic Church 9th St	,	Contribution	Monthly	\$200.00
		n Arrow, OK 74012-4409				
Par	t 6: Li	st Certain Losses				
15.	Within 1 or gamb		ptcy or s	ince you filed for bankruptcy, did you lose anyt	hing because of theft,	fire, other disaster,
	■ No	s. Fill in the details.				
	Describ	be the property you lost and	Describ	pe any insurance coverage for the loss	Date of your	Value of property
	how the	e loss occurred		the amount that insurance has paid. List pending ce claims on line 33 of Schedule A/B: Property.	loss	lost
Par	t 7: Li	st Certain Payments or Transfers				
16.	consult	ed about seeking bankruptcy or p	reparing	you or anyone else acting on your behalf pay og a bankruptcy petition? or credit counseling agencies for services required in		y to anyone you
	_	. ,	, , .	3.3	,	
	□ No ■ Yes	s. Fill in the details.				
		Who Was Paid		Description and value of any property	Date payment or	Amount of
		s or website address Who Made the Payment, if Not Y	OU	transferred	transfer was made	payment
	Irons	Law Firm PLLC E 39th St		Retainer	04/012022	\$1,500.00
	Tulsa,	OK 74135-4631				

Case number (if known)

	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and variansferred	alue of any prope	rty	Date payment or transfer was made	Amount of payment
	001 Debtorcc, Inc 378 Summit Ave Jersey City, NJ 07306-3110	Credit Counsel	ling		01/20/2022	\$40.00
17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor. Do not include any payment or transfer that you li	s or to make payments			r transfer any proper	rty to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address	Description and v	value of any prope	rty	Date payment or transfer was	Amount of payment
					made	
18.	Within 2 years before you filed for bankrupto transferred in the ordinary course of your but include both outright transfers and transfers mad gifts and transfers that you have already listed on No	isiness or financial affa le as security (such as the	irs?			
	Yes. Fill in the details.					
	Person Who Received Transfer Address	Description and v property transfer			any property or received or debts change	Date transfer was made
	Person's relationship to you	0040 Famant Bir	DV	0-1-1-00	500.00	44/44/0004
	Brian Lewis None	2018 Forest Ri	ver KV	Sold 28,500.00 11/11/2021 Funds used to pay off Ioan at Saint Francis Credit Union		
	Shelan Whitehead	2020 Benningto	on Pontoon	Sold 42, Funds u Western	sed to pay off	7/26/2021
	None			western	- Sun	
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-protein No	ccy, did you transfer an ection devices.)	y property to a seli	f-settled tru	st or similar device o	of which you are a
	Yes. Fill in the details.					
	Name of trust	Description and v	alue of the proper	ty transferr	ed	Date Transfer was made
Par	t 8: List of Certain Financial Accounts, Inst	truments, Safe Deposit	Boxes, and Storag	je Units		
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associ	other financial accoun	ts; certificates of c	,		, ,
	Yes. Fill in the details.					
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	cle	ate account was osed, sold, oved, or ansferred	Last balance before closing or transfer

Debtor 1 Reynolds, Joshua Kent

De	btor 1 Reynolds, Joshua Kent	ynolds, Joshua Kent				Case number (if known)				
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number			Date account was closed, sold, moved, or transferred	Last balance before closing or transfer				
	Bank of Oklahoma PO Box 2300 Tulsa, OK 74102-2300	xxxx-0881	■ Checking □ Savings □ Money Ma □ Brokerage □ Other	□ Checking 11/29/2021 □ Savings □ Money Market □ Brokerage		\$-2,291.70				
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed fo	or bankruptcy, aı	ny safe dep	osit box or other depos	sitory for securities,				
	■ No □ Yes. Fill in the details.									
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had a Address (Numbe and ZIP Code)		Describe	the contents	Do you still have it?				
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?									
	□ No									
	Yes. Fill in the details.									
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has o to it? Address (Numbe and ZIP Code)		Describe	the contents	Do you still have it?				
	Aspen Mini Storage 1900 W New Orleans St Broken Arrow, OK 74011-1427			Ladders lumber	ders, shelving, paint, □ No per ■ Yes					
Pa	rt 9: Identify Property You Hold or Contro	ol for Someone Else								
23.	Do you hold or control any property that s someone.	omeone else owns? Inc	clude any propert	ty you borro	owed from, are storing	for, or hold in trust for				
	■ No □ Yes. Fill in the details.									
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pr (Number, Street, Cit Code)		Describe	the property	Value				
Pa	rt 10: Give Details About Environmental In	formation								
For	the purpose of Part 10, the following definit	ions apply:								
•	Environmental law means any federal, stat toxic substances, wastes, or material into controlling the cleanup of these substance	the air, land, soil, surfac	•	• .	•					
	Site means any location, facility, or proper own, operate, or utilize it, including dispos	ty as defined under any	environmental l	law, whethe	r you now own, operate	e, or utilize it or used to				
	Hazardous material means anything an en material, pollutant, contaminant, or similar		s as a hazardous	waste, haza	ardous substance, toxi	c substance, hazardous				

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Case 22-10616-M Document 1 Filed in USBC ND/OK on 06/30/22 Page 49 of 68 Debtor 1 Reynolds, Joshua Kent Case number (if known) 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Nο Yes. Fill in the details. Environmental law, if you Date of notice Name of site Governmental unit Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? Nο Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation ■ No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Revnolds Renovations, LLC Home Rennvations Contracting EIN: EIN 881646492 2110 W Pittsburg Pl From-To 02/01/2022 to Current **Broken Arrow, OK 74012-5189** Worked as a dba prior to incorporating

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

Date Issued

No

Yes. Fill in the details below.

Name Address

(Number, Street, City, State and ZIP Code)

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a

Debtor 1 Reynolds, Joshua	Kent	Case number (if known)
bankruptcy case can result in fin 18 U.S.C. §§ 152, 1341, 1519, and	es up to \$250,000, or imprisonment for up to 3571.	20 years, or both.
/s/ Joshua Kent Reynolds Joshua Kent Reynolds Signature of Debtor 1	Signature of Debto	r 2
Date June 30, 2022	Date	
Did you attach additional pages ■ No □ Yes	to Your Statement of Financial Affairs for Ind	ividuals Filing for Bankruptcy (Official Form 107)?
Did you pay or agree to pay som ■ No	eone who is not an attorney to help you fill o	ut bankruptcy forms?
☐ Yes. Name of Person A	attach the Bankruptcy Petition Preparer's Notice,	Declaration, and Signature (Official Form 119).

Fill in this i	nformation to identify your case:		Check on	e box only as d	rected in this form and	d in Form
Debtor 1	Joshua Kent Reynolds		122A-1St	ibb:		
Debtor 2			Пит	hara ia na nraa	umption of obuse	
(Spouse, if fili	ng)		<u>_</u>		umption of abuse	
United Sta	Northern Dites Bankruptcy Court for the: Northern Division	istrict of Oklahoma, Tulsa	;	applies will be m	o determine if a presur nade under <i>Chapter 7 N</i> cial Form 122A-2).	•
Case num (if known)	per				does not apply now bed out it could apply later.	cause of qualified
O.(;; ;	LE 400A 4		☐ Ch	eck if this is a	n amended filing	
	I Form 122A - 1		_			
Chapt	er 7 Statement of Your	Current Monthly	Incom	9		12/19
a separate s number (if k	lete and accurate as possible. If two married p heet to this form. Include the line number to w nown). If you believe that you are exempted fr ice, complete and file Statement of Exemption Calculate Your Current Monthly Income	which the additional information a com a presumption of abuse becan in from Presumption of Abuse Und	pplies. On the use you do no	top of any additi	onal pages, write your i consumer debts or beca	name and case ause of qualifying
1. What	is your marital and filing status? Check	one only.				
■ No	ot married. Fill out Column A, lines 2-11.					
	arried and your spouse is filing with you.	. Fill out both Columns A and B	, lines 2-11.			
	arried and your spouse is NOT filing with					
	Living in the same household and are no	ot legally separated. Fill out bo	th Columns A	and B, lines 2-	11.	
	Living separately or are legally separate penalty of perjury that you and your spouse apart for reasons that do not include evadin	are legally separated under nonli	bankruptcy lav	v that applies or	• • • • • • • • • • • • • • • • • • • •	
101(10A) 6 months	e average monthly income that you received for b. For example, if you are filing on September 15, countries, and the income for all 6 months and divide the to the same rental property, put the income from that pro-	the 6-month period would be March otal by 6. Fill in the result. Do not in	n 1 through Aug clude any incor	ust 31. If the amone amount more t	unt of your monthly incom han once. For example, if	ne varied during the
			Colur Debte		Column B Debtor 2 or non-filing spouse	
	gross wages, salary, tips, bonuses, over ll deductions).	time, and commissions (befor	re all \$	0.00	\$	
3. Alimo	ony and maintenance payments. Do not in not in B is filled in.	nclude payments from a spouse	e if \$	0.00	\$	
4. All ar of yo from room	nounts from any source which are regula u or your dependents, including child su an unmarried partner, members of your hous mates. Include regular contributions from a of include payments you listed on line 3	pport. Include regular contribut ehold, your dependents, parents	ises tions s, and	0.00	\$	
	ncome from operating a business, profes	sion, or farm				
		Debtor 1				
Gross	s receipts (before all deductions)	\$ 65,735.35				
	ary and necessary operating expenses	-\$	`any			
	nonthly income from a business, ssion, or farm	\$6,830.91 h	copy ere -> \$	6,830.91	\$	
6. Net i i	ncome from rental and other real property	y Debtor 1				
Gross	s receipts (before all deductions)	\$ 0.00				
	ary and necessary operating expenses	-\$ 0.00				
	nonthly income from rental or other real prop	perty \$ Copy h	nere -> \$	0.00	\$	
7. Inter	est, dividends, and royalties		\$	0.00	\$	

Official Form 122A-1

Debtor	Reynolds, Joshua Kent			Case number	er (<i>if known</i>)			
				Column A Debtor 1		Column B Debtor 2 or non-filing s		
8.	Unemployment compensation			\$	0.00	\$		_
	Do not enter the amount if you contend that the amount re Social Security Act. Instead, list it here:	eceived was a benefit und	er the					
	For you \$ For your spouse \$	0.00	<u> </u>					
	For your spouse \$		_					
	Pension or retirement income. Do not include any amounder the Social Security Act. Also, except as stated in the include any compensation, pension, pay, annuity, or allow Government in connection with a disability, combat-relate a member of the uniformed services. If you received any 161 of title 10, then include that pay only to the extent that of retired pay to which you would otherwise be entitled if retitle 10 other than chapter 61 of that title.	ne next sentence, do not vance paid by the United S id injury or disability, or de retired pay paid under cha it does not exceed the am	States ath of opter ount	\$	0.00	\$		
	Income from all other sources not listed above. Spe Do not include any benefits received under the Social Sec as a victim of a war crime, a crime against humanity, or interrorism; or compensation pension, pay, annuity, or allow States Government in connection with a disability, comba death of a member of the uniformed services. If necessar separate page and put the total below	curity Act; payments receinternational or domestic wance paid by the United trelated injury or disability, list other sources on a	ved	\$_	0.00	\$		
				\$	0.00	\$		-
	Total amounts from separate pages, if any.		+	\$	0.00	\$		_
	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the tot total for Column A to the total for Co	tal for Column B.		6,830.91	+ \$		Tota inco	6,830.91
12	Calculate your current monthly income for the year.	Follow these steps:						
	12a. Copy your total current monthly income from line 1	•		Сор	y line 11 h	ere=>	\$	6,830.91
	Multiply by 12 (the number of months in a year)						x	12
	12b. The result is your annual income for this part of the	form				12b	. \$	81,970.92
13	Calculate the median family income that applies to y	Ou Follow these steps:					L	
	,,							
	Fill in the state in which you live.	ОК						
	Fill in the number of people in your household.	2						
	Fill in the median family income for your state and size of To find a list of applicable median income amounts, go form. This list may also be available at the bankruptcy of	online using the link spec	ified ir	the separa	te instruction	13. ons for this	\$	66,786.00
14.	How do the lines compare?							
	14a. Line 12b is less than or equal to line 13. Or Go to Part 3. Do NOT fill out or file Official		k box	1T,here is no	presumptic	n of abuse.		
	14b. Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A2.		presu	ımption of al	ouse is dete	ermined by Fo	orm 122	A-2.
Part								
	By signing here, I declare under penalty of perjury the	nat the information on this	staten	nent and in a	ny attachm	ents is true ar	nd corre	ect.
	X /s/ Joshua Kent Reynolds							
	Joshua Kent Reynolds Signature of Debtor 1							
	Date June 30, 2022							

Case 22-10616-M Document 1 Filed in USBC ND/OK on 06/30/22 Page 53 of 68

Debtor 1	Reynolds, Joshua Kent	Case number (if known)	
	MM/DD/YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form	n.	

Fill in this information to identify your case:								
Debtor 1 Joshua Kent Reynolds								
Debtor 2 (Spouse, if filing)								
United States Bankruptcy Court for the: Northern District of Oklahoma, Tulsa Division								
Case number (if known)								

Check the appropriate box as directed in lines 40 or 42:
According to the calculations required by this Statement:
■ 1. There is no presumption of abuse.
☐ 2. There is a presumption of abuse.

☐ Check if this is an amended filing

Official Form 122A - 2

Chapter 7 Means Test Calculation

04/22

To fill out this form, you will need your completed copy of Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Par	1: Determine Your Adjusted Income	
1.	Copy your total current monthly income.	Copy line 11 from Official Form 122A-1 here=> \$ 6,830.91
2.	Did you fill out Column B in Part 1 of Form 122A-1?	
	■ No. Fill in \$0 for the total on line 3.	
	☐ Yes. Is your spouse Filing with you?	
	☐ No. Go to line 3.	
	☐ Yes. Fill in \$0 the total on line 3.	
3.	Adjust your current monthly income by subtracting any household expenses of you or your dependents. Follow to	
	On line 11, Column B of Form 122A-1, was any amount of th you or your dependents?	ne income you reported for your spouse NOT regularly used for the household expenses of
	■ No. Fill in 0 for the total on line 3. ☐ Yes. Fill in the information below: State each purpose for which the income was used.	and archive ation of some
	For example, the income is used to pay your spouse's support people other than you or your dependents.	your spouse's income
		\$
		\$
		\$
	Total.	\$
		Copy total here=> \$ 0.00
4.	Adjust your current monthly income. Subtract line 3 from	s 6,830.91

Debtor 1	Reynolds, Joshua Kent		Case number	(if known)				
Part 2	Calculate Your Deductions from Your Income							
ans	Internal Revenue Service (IRS) issues National and L wer the questions in lines 6-15. To find the IRS standa this form. This information may also be available at th	ards, go online usir	ng the link specified					
actu	luct the expense amounts set out in lines 6-15 regardless of ual expenses if they are higher than the standards. Do not of do not deduct any operating expenses that you subtracted	deduct any amounts	that you subtracted fro	your spouse's income in lin				
If yo	our expenses differ from month to month, enter the average	expense.						
Wh	enever this part of the form refers to you, it means both yo	u and your spouse i	f Column B of Form 1	22A-1 is filled in.				
5.	5. The number of people used in determining your deductions from income							
	Fill in the number of people who could be claimed as exernumber of any additional dependents whom you support. people in your household.				3			
Nat	ional Standards You must use the IRS National	al Standards to answ	ver the questions in li	nes 6-7.				
6.	Food, clothing, and other items: Using the number of fill in the dollar amount for food, clothing, and other item		in line 5 and the IRS	National Standards, \$	1,410.00			
7.	Out-of-pocket health care allowance: Using the number the dollar amount for out-of-pocket health care. The number people who are 65 or olderbecause older people have a higher than this IRS amount, you may deduct the additional contents of the contents	per of people is split higher IRS allowand	into two categoriespe e for health care costs	eople who are under 65 and				
Peo	ple who are under 65 years of age							
	7a. Out-of-pocket health care allowance per person	\$75.00	_					
	7b. Number of people who are under 65	X2						
	7c. Subtotal. Multiply line 7a by line 7b.	\$150.00	Copy here	e=> \$ <u>150.00</u>				
Peo	ple who are 65 years of age or older							
	7d. Out-of-pocket health care allowance per person	\$153.00	_					
	7e. Number of people who are 65 or older	xo						
	7f. Subtotal. Multiply line 7d by line 7e.	\$	Copy here	=> +\$				
	7g. Total. Add line 7c and line 7f		\$150.00	Copy total here=>	\$150.00_			

Debtor 1	_R	Reynolds, Joshua Kent	Case number (if known)
Loc	al Sta	andards You must use the IRS Local Standards to an	swer the questions in lines 8-15.
		n information from the IRS, the U.S. Trustee Program s into two parts:	has divided the IRS Local Standard for housing for bankruptcy
■ +	lous	ing and utilities - Insurance and operating expenses	
■ F	lous	ing and utilities - Mortgage or rent expenses	
To a	ınsw	er the questions in lines 8-9, use the U.S. Trustee Pro	ogram chart.
		ne chart, go online using the link specified in the separate t may also be available at the bankruptcy clerk's office.	e instructions for this form.
8.		using and utilities - Insurance and operating expense dollar amount listed for your county for insurance and ope	s: Using the number of people you entered in line 5, fill in rating expenses \$ 653.00
9.	Ηοι	ising and utilities - Mortgage or rent expenses:	
	9a.	Using the number of people you entered in line 5, fill in listed for your county for mortgage or rent expenses	A 1 1 1 1 0 0
	9b.	Total average monthly payment for all mortgages and oth	ner debts secured by your home.
		To calculate the total average monthly payment, add a contractually due to each secured creditor in the 60 mon bankruptcy. Then divide by 60.	
		Name of the creditor	Average monthly payment
		-NONE-	\$
		Total average monthly payment	\$Copy here=> -\$Repeat this amount on line 33a.
	9c.	Net mortgage or rent expense.	
		Subtract line 9b (total average monthly paymen) from li rent expense). If this amount is less than \$0, enter \$0.	
10.		ou claim that the U.S. Trustee Program's division of t cts the calculation of your monthly expenses, fill in a	
	Ex	plain why:	
11.	Loc	al transportation expenses: Check the number of vehic	cles for which you claim an ownership or operating expense.
). Go to line 14.	
	1	I. Go to line 12.	
		2 or more. Go to line 12.	
12.		icle operation expense: Using the IRS Local Standards enses, fill in the Operating Costs that apply for your Census	s and the number of vehicles for which you claim the operating us region or metropolitan statistical area.

Debtor 1	Reynolds, Joshua Kent		Case number (if known)	
	Vehicle ownership or lease expense: Using the IRS Local S may not claim the expense if you do not make any loan or lease two vehicles.			
Veh	Describe Vehicle 1:			
13a.	Ownership or leasing costs using IRS Local Standard		\$ 588.00	
	Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles.			
	To calculate the average monthly payment here and on line 1 contractually due to each secured creditor in the 60 months after Then divide by 60.			
	Name of each creditor for Vehicle 1	Average monthly payment		
	Western Sun Credit Union	\$ 1,050.00		
	Total Average Monthly Payment	\$1,050.00	Copy here => -\$1,050.	Repeat this amount on line 33b.
	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this amount is less than \$0,	enter \$0	. \$	Copy net Vehicle 1 expense here => \$ 0.00
ven	Describe Vehicle 2:			
13d.	Ownership or leasing costs using IRS Local Standard		\$	
	Average monthly payment for all debts secured by Vehicle 2. Deleased vehicles.	o not include costs for		
	Name of each creditor for Vehicle 2	Average monthly payment		
		\$		
	Total Average Monthly Payment	\$	Copy here => -\$	Repeat this amount on line 33c.
	Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this amount is less than \$0,	enter \$0	. \$0.00	Copy net Vehicle 2 expense here => \$ 0.00
14.	Public transportation expense: If you claimed 0 vehicles in language of the transportation expense allowance regardless of whether you use		cal Standards, fill in th <i>eubl</i>	s
	Additional public transportation expense: If you claimed 1 deduct a public transportation expense, you may fill in what you more than the IRS Local Standard for Public Transportation.			

Debtor 1 Reynolds, Joshua Kent Case number (if known)

Oth	er Necessary Expenses	In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.		
16.	self-employment taxes, Soci your pay for these taxes. Ho	mount that you will actually owe for federal, state and local taxes, such as income taxes, ial Security taxes, and Medicare taxes. You may include the monthly amount withheld from owever, if you expect to receive a tax refund, you must divide the expected refund by 12 and the total monthly amount that is withheld to pay for taxes.		
	Do not include real estate, s	ales, or use taxes.	\$	0.00
17.	Involuntary deductions: Tunion dues, and uniform co	The total monthly payroll deductions that your job requires, such as retirement contributions, osts.		
	Do not include amounts that	t are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$	0.00
18.	together, include payments	nonthly premiums that you pay for your own term life insurance. If two married people are filing that you make for your spouse's term life insurance. Do not include premiums for life insurance on-filing spouse's life insurance, or for any form of life insurance other than term.	\$	65.50
19.	Court-ordered payments: agency, such as spousal or	The total monthly amount that you pay as required by the order of a court or administrative child support payments.		
	Do not include payments of	n past due obligations for spousal or child support. You will list these obligations in line 35.	\$	0.00
20.	Education: The total month as a condition for your jo	nly amount that you pay for education that is either required: b, or		
	for your physically or me	ntally challenged dependent child if no public education is available for similar services.	\$	0.00
21.	Childcare: The total month	ly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool.		
	Do not include payments for	r any elementary or secondary school education.	\$	810.00
22.	required for the health and v	penses, excluding insurance costs: The monthly amount that you pay for health care that is welfare of you or your dependents and that is not reimbursed by insurance or paid by a health only the amount that is more than the total entered in line 7.		
	Payments for health insuran	nce or health savings accounts should be listed only in line 25.	\$	0.00
23.	you and your dependents, s	elephone services: The total monthly amount that you pay for telecommunication services for uch as pagers, call waiting, caller identification, special long distance, or business cell phone sary for your health and welfare or that of your dependents or for the production of income, if it imployer.		
		or basic home telephone, internet and cell phone service. Do not include self-employment ported on line 5 of Official Form 122A-1, or any amount you previously deducted.	+\$	0.00
24.	Add all of the expenses al Add lines 6 through 23.	llowed under the IRS expense allowances.	\$	4,496.50

Debtor 1 Reynolds, Joshua Kent Case number (if known)

Add	Additional Expense Deductions These are additional deductions allowed by the Means Test.							
			Note: Do not include a	any expen	se allowances li	sted in lines 6-24.		
25.		nce, disability insurance, ar				es. The monthly expenses for health ecessary for yourself, your spouse, or you	r	
	Health	n insurance		\$	650.00			
	Disabi	ility insurance		\$	0.00			
	Health	n savings account		+\$	0.00			
						7		
	Total			\$	650.00	Copy total here=>	\$	650.00
	Do yo	u actually spend this total a	imount?			_		
		No. How much do you act	ually spend?					
		Yes	, ,	\$				
	continu house contrib	ue to pay for the reasonable hold or member of your immoutions to an account of a q	and necessary care and nediate family who is ur ualified ABLE program.	nd suppor nable to pa . 26 U.S.0	rt of an elderly, on ay for such expe C.§ 529A(b).	actual monthly expenses that you will chronically ill, or disabled member of your enses. These expenses may include	\$	0.00
21.		nd your family under the Far				es that you incur to maintain the safety of er federal laws that apply.		
	By law	v, the court must keep the na	ature of these expense	s confider	ntial.		\$	0.00
28.	8. Additional home energy costs. Your home energy costs are included in your insurance and operating expenses on line 8. If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs. You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary.					\$	0.00	
29.	\$189.5 elemei You m	58* per child) that you pay fontary or secondary school.	or your dependent child locumentation of your a	lren who a actual exp	are younger than enses, and you	monthly expenses (not more than n 18 years old to attend a private or public must explain why the amount claimed is		
	* Subj	ect to adjustment on 4/01/2	5, and every 3 years af	ter that fo	r cases begun c	on or after the date of adjustment.	\$	0.00
30.	30. Additional food and clothing expense. The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards. To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. You must show that the additional amount claimed is reasonable and necessary.					\$	0.00	
31.		nuing charitable contribu ments to a religious or chari				ribute in the form of cash or financial	+\$	200.00
32.		all of the additional expensions 25 through 31.	se deductions.				\$	850.00

Debtor 1 Reynolds, Joshua Kent Case number (if known)

Deduc	Deductions for Debt Payment								
an	d other secured debt, fill in lines 33a	•							
	To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.								
	Mortgages on your home:					verage monthly ayment			
33a.	Copy line 9b here				=> \$	0.00)		
	Loans on your first two vehicles:								
33b.	Copy line 13b here			=	=> \$	1,050.00	<u>)</u>		
33c.					=> \$	338.33	3_		
33d.	List other secured debts:								
Name (of each creditor for other secured debt	Identify property that secures the debt		Does payment include taxes of insurance?					
				□ No					
	-NONE-			☐ Yes	\$				
-		_			•		_		
				☐ No					
_				☐ Yes	\$		_		
				□ No					
				□ Yes	+\$				
-					 T		_		
					Сору				
33e.	Total average monthly payment. Add li	nes 33a through 33d	\$	1,388.33	total here=>	\$ 1,388.3	33		
		secured by your primary residence, a vehic port or the support of your dependents?	e, or						
	No. Go to line 35.								
Ц		at pay to a creditor, in addition to the payments our property (called the <i>cure amount</i>). Next, dividow.							
Name	e of the creditor	Identify property that secures the debt		Total cure amount		Monthly cure amount			
-NO	NE-		\$		÷ 60 = \$				
					٦		_		
		Tot	al \$	0.00	Copy total here=>	. \$	0.00		
	o you owe any priority claims such as e past due as of the filing date of you	s a priority tax, child support, or alimony - th ir bankruptcy case? 11 U.S.C. § 507.	at		_				
	No. Go to line 36.								
		these priority claims. Do not include current or ou listed in line 19.	ongoing						
	Total amount of all past-due p	riority claims	\$	0.00	÷ 60 =	\$	0.00		

Debtor 1	Rey	nolds, Joshua Kent		Cas	se n	umber (if known)					
F	or more	eligible to file a case under Chapter 13? 11 U.S.C. § 10 information, go online using the link fo <i>Bankruptcy Basics</i> ns for this form. <i>Bankruptcy Basics</i> may also be available a	specifie			ce.					
	□ No.	Go to line 37.									
	Yes.	Fill in the following information.									
		Projected monthly plan payment if you were filing under C	hapter 1	3	\$	9	6.08				
	Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts).			6.90							
		To find a list of district multipliers that includes your distr link specified in the separate instructions for this form. T available at the bankruptcy clerk's office.						Copy tota			
		Average monthly administrative expense if you were filing	under Cl	napter 13		\$6.0	63	nere=>	\$	6.6	63
		of the deductions for debt payment. s 33e through 36.							\$	1,394.96	_
Total	Deduc	tions from Income									
38. A	dd all o	f the allowed deductions.									
		e 24,All of the expenses allowed under IRS e allowances	\$	4,496.50)						
	Copy lin	e 32, All of the additional expense deductions	\$	850.00	<u>)</u>						
	Copy lin	e 37, All of the deductions for debt payment	+\$	1,394.96	<u> </u>						
		Total deductions	\$	6,741.46	<u> </u>	Copy total h	nere	=>	\$	6,741.4	46_
Part 3:	Det	ermine Whether There is a Presumption of Abuse									
39. C	alculate	e monthly disposable income for 60 months									
	39a. Co	py line 4, adjusted current monthly income	\$	6,830.91	<u>1_</u>						
	39b. Co	py line 38,Total deductions	- \$	6,741.46	<u>3</u>						
		onthly disposable income. 11 U.S.C. § 707(b)(2). btract line 39b from line 39a	\$	89.4	5_	Copy here=>\$		89	0.45		
	For the i	next 60 months (5 years)					x 60				
		,									\neg
	39d. To	tal. Multiply line 39c by 60		\$	5	5,367.00	Copy here=>	\$_		5,367.00	_
40. F	ind out	whether there is a presumption of abuse. Check the bo	ox that a	pplies:							
	■ The I	ine 39d is less than \$9,075*. On the top of page 1 of this	form, ch	eck box 1, There	e is	no presumpt	ion of al	buse. Go	to Part	5.	
		ine 39d is more than \$15,150*. On the top of page 1 of the claim special circumstances. Go to Part 5.	is form,	check box 2, Th	ere	is a presump	otion of a	abuse. Yo	ou may	fill out Part	4
		ine 39d is at least \$9,075*, but not more than \$15,150*.	Go to lir	ne 41.							
*(Subject	to adjustment on 4/01/25, and every 3 years after that for ca	ases filed	d on or after the	dat	e of adjustme	nt.				

Debtor 1	Rey	nolds, Joshua Kent	Case number (if known)
41.	41a.	Fill in the amount of your total nonpriority unsecured debt. If you filled Summary of Your Assets and Liabilities and Certain Statistical Information Schedules (Official Form 106Sum), you may refer to line 3b on that form.	out <i>A</i> 41a. \$ X .25
	41b.	25% or your total nonpriority unsecured debt. 11 U.S.C. § 707(b)(2)(A)(i	
		Multiply line 41a by 0.25	
of	your i	ne whether the income you have left over after subtracting all allowed do unsecured, nonpriority debt. he box that applies:	leductions is enough to pay 25%
		39d is less than line 41b. On the top of page 1 of this form, check box 1, <i>The</i> Part 5.	ere is no presumption of abuse.
		39d is equal to or more than line 41b. On the top of page 1 of this form, chee. You may fill out Part 4 if you claim special circumstances. Then go to Part	
Part 4:	Giv	ve Details About Special Circumstances	
3. Do y reas	ou hav	ve any special circumstances that justify additional expenses or adjustme alternative? 11 U.S.C. § 707(b)(2)(B).	ments of current monthly income for which there is no
	No. Go	o to Part 5.	
		Il in the following information. All figures should reflect your average monthly ex ou may include expenses you listed in line 25.	xpense or income adjustment for each item.
	ne	ou must give a detailed explanation of the special circumstances that make the acessary and reasonable. You must also give your case trustee documentation lijustments.	
	G	Sive a detailed explanation of the special circumstances	Average monthly expense or income adjustment
			\$
	_		\$
	_		\$
			\$
Part 5:	Sig	gn Below	
	By si	gning here, I declare under penalty of perjury that the information on this staten	ment and in any attachments is true and correct.
	X /s	/ Joshua Kent Reynolds	
	Jo	oshua Kent Reynolds gnature of Debtor 1	
Da	ate Ju	une 30, 2022	
	MI	M/DD/YYYY	

Certificate Number: 15725-OKN-CC-036275960



CERTIFICATE OF COUNSELING

I CERTIFY that on January 20, 2022, at 3:07 o'clock PM EST, Joshua Reynolds received from 001 Debtorce, Inc., an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the Northern District of Oklahoma, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date:	January 20, 2022	By:	/s/Israel Guevara
		Name:	Israel Guevara
D 10	The state of the s	Title:	Issuer

^{*} Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		er 7:	Liquidation
		\$245	filing fee
		\$78	administrative fee
	+	\$15	trustee surcharge
		\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee \$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Oklahoma, Tulsa Division

In r	e Reynolds, Joshua Kent	,	Case N	lo	
		Debtor(s)	Chapte	r 7	
	DISCLOSURE OF COMPEN	SATION OF ATTO	ORNEY FOR	R DEBTOR	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptc	y, or agreed to be	paid to me, for servi	
	For legal services, I have agreed to accept		\$	1,500.00	
	Prior to the filing of this statement I have received			1,500.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compen firm.	sation with any other perso	n unless they are 1	members and associa	tes of my law
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the name				my law firm. A
5.	In return for the above-disclosed fee, I have agreed to rend	ler legal service for all aspe	cts of the bankrup	tcy case, including:	
	a. Analysis of the debtor's financial situation, and renderingb. Preparation and filing of any petition, schedules, statemc. Representation of the debtor at the meeting of creditorsd. [Other provisions as needed]	nent of affairs and plan which	ch may be require	d;	bankruptcy;
6.	By agreement with the debtor(s), the above-disclosed fee d	loes not include the followi	ng service:		
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any a bankruptcy proceeding.	agreement or arrangement f	or payment to me	for representation of	the debtor(s) in
	June 30, 2022	/s/ William Bryar	n Irons		
_	Date	William Bryan Ir	ons		
		Signature of Attorn Irons Law Firm,			
		3315 East 39th S	S +		
		Tulsa, OK 74135	-4631		
		(918) 392-0079 birons@ironsleg		0069	
		Name of law firm	jai.com		